DEPARTMENT OF HEALTH AND FAMILY SERVICES

STATE OF WISCONSIN

Division of Management and Technology DMT-891 (rev. 1/03)

Contract Administration 4.0

LISTING OF EXPECTED CONTRACTS

Contracting	ng Division						CARS Use Only
DCFS	DMT	Type of Contract	Program Name				CARS Log Number
DSL	DOA	New					
DPH	DHCF	Change of Time					CARS Approval Date
OSF	ТСВ	Change of Amount					1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
	ТСВ			DDOE!! E N			
Contract Period Beginning Date		PROFILE ID Number		PROFILE N	ame		CARS Initials
Ending Date							O/ tree iriniais
Agency Name		<u> </u>	Agency	Agency	New or Original	Contract Change	Total Contract
			Number	Туре	Contract Amount (A)	Amount (+ -) (B)	Amount (A + OR - B)
Totals From Page 1							
Totals From Page 2							
Grand Total							
						Date Prepared	I
Division Contact Telephone No.					TUITIDGI	Date i Tepateu	